

# BEST AVAILABLE COPY

NOTE: See also P. 10-1-1 (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A.		04/23/01
O.I.P.E. CLASSIFIER			5-12-01
FORMALITY REVIEW	S.H.	1085	6/11/01
RESPONSE FORMALITY REVIEW	CK	1109	5-01-02

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/3/01
2	12/3/01
3	12/3/01
4	12/3/01
5	12/3/01
6	12/3/01
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49	12/3/01
50	12/3/01

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here